


got prevention?

it's a question of value



2005

A Report from the Washington Council for Prevention of Child Abuse and Neglect

RCW 43.121.010

Legislative declaration, intent.

The legislature recognizes that child abuse and neglect is a threat to the family unit and imposes major expenses on society. The legislature further declares that there is a need to assist private and public agencies in identifying and establishing community based educational and service programs for the prevention of child abuse and neglect. It is the intent of the legislature that an increase in prevention programs will help reduce the breakdown in families and thus reduce the need for state intervention and state expense. It is further the intent of the legislature that prevention of child abuse and neglect programs are partnerships between communities, citizens and the state.

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why 'shareholder'?

You are a shareholder in Washington's child abuse and neglect prevention portfolio if you:

- pay taxes.
- are a parent.
- work with children.
- look out for children's well being – in your family, neighborhood, or community.
- vote.

We could call you a "stakeholder." The meanings are almost the same.

(Stakeholder: one who has a share or an interest, as in an enterprise.)

But the dollars are real. Our focus on investing for maximum impact is real.

Shareholder.

Stakeholder.

We all are both.

letter from the chair

To Our Shareholders:

Why “shareholders”?

Because funding effective community-based child abuse and neglect prevention – a major purpose of the Washington Council for Prevention of Child Abuse & Neglect – is truly an investment.

Choosing the right investment strategy can make all the difference for an individual, a family or a state.

Investing in effective child abuse and neglect prevention pays the highest dividends in the results we want: healthy children succeeding in school, becoming productive workers, and someday raising healthy families of their own.

As a part of making sure Washington’s investments are the smartest they can be, the WCPCAN Council this year decided to increase our focus on children from birth to age three. The science of brain development tells us it’s the time when the foundation is set for future development. And, as abuse data shows, it’s also the time of greatest risk for children. (See pages 3 and 33 for more on our rationale).

For every dollar the state spends on preventing child abuse and neglect, \$321 is spent on after-the-fact interventions like foster care.

As a percentage of the entire state budget, child abuse and neglect prevention’s share is so small as to be almost invisible.

The share may be small, but the stakes couldn’t be higher.

We invite you to consider the facts, analysis and recommendations presented in this report.

We believe you will come to the same conclusion we have. Investing in effective prevention is the right investment strategy for Washington’s shareholders.



Kyle Yasuda, MD
Chair, WCPCAN Council
Clinical Professor, Department of Pediatrics
University of Washington School of Medicine, Seattle



from the executive director

Two years ago during Washington State's most recent budget crisis, the Washington Council for Prevention of Child Abuse and Neglect (WCPCAN) faced potential elimination. Advocacy by champions throughout the state and in the legislature ensured that Washington's 21-year investment in strengthening families to better protect children from abuse and neglect would not be sacrificed for short-term budget savings.

The Chinese word for "crisis" is comprised of two characters. One means danger, the other, opportunity. At WCPCAN, we decided to respond to 2003's challenge as an opportunity – to improve practice, strengthen partnerships, and build visibility. In short, to encourage greater investment in child abuse and neglect prevention, and to point out WCPCAN's unique contribution to that cause.

The Chinese Symbol for "Crisis"



Some of the efforts we've undertaken:

- **An 'organizational peer review.'** With technical assistance provided from Family Support America, we sought out information from key stakeholders about our performance. Where specifically could we improve? While we undertook this for Washington's benefit, this effort ended up getting national attention and recognition.
- **A new strategic plan.** The WCPCAN Council's year-long conversation on critical issues in child abuse and neglect prevention resulted in the development of a new strategic plan that provides a clearer blueprint to guide future efforts.
- **A focus on 0-3.** One of WCPCAN's greatest strengths is our clear focus. That focus got even sharper with the recent decision to concentrate our efforts even more on young children.
- **Revenue-generating initiatives.** Two products are in development that will provide additional funds for child abuse and neglect prevention that won't take a dime from the state's general fund: a revamped Heirloom Birth Certificate and a new 'Keep Kids Safe' license plate.
- **Efficiency initiatives.** We're deeply involved in trying to find out where increased collaboration or other measures will save money and improve results. We've also reconfigured services to take better advantage of new technologies.

- **Performance measurement.** We undertook an exhaustive study of how community-based programs benefited from the resources we provided over the last 20 years. Based on the findings and our new focus, we are fine tuning our grant making and technical assistance programs, implementing new outreach efforts, and beefing up measurement practices.
- **Policy education & advocacy.** Many of the changes needed to better protect children and strengthen families need policy solutions. We reconfigured staffing to make sure the expertise WPCAN has developed on effective prevention is considered in policy venues.
- **Visibility.** Expertise and resources mean nothing if not shared; unheard messages change nothing. We're trying to raise our profile so that everyone who wants to reduce child abuse and neglect in Washington is aware that help is available.

A year ago, WPCAN published its first Ounce of Prevention report to help make the case for effective child abuse and neglect prevention. This second installment zeroes in on some specifics that we believe will help move the cause of child abuse and neglect prevention forward in Washington. As Washington State's identified leader for child abuse and neglect prevention, that's our job.

But it's more than a job. It's a cause worth fighting for with the very best all of us have to offer.

We hope this report will help you find ways to join in on behalf of better outcomes for all of Washington's children.



Joan Sharp
WPCAN Executive Director



section 1



"According to one study, child abuse costs the economy of the United States \$94 billion annually – amounting to one percent of the nation's GDP. "

– (World Health Organization Report on Violence and Health, 2004)

a unique asset

Established by the legislature in 1982 in response to a statewide grassroots lobbying effort, the Washington Council for Prevention of Child Abuse & Neglect (WCPCAN) represents a unique asset in Washington’s efforts to ensure the health and well being of our state’s children.

The structure and function created by WCPCAN’s authorizing legislation, RCW 43.121, anticipated today’s demand for cost-efficient, performance-oriented public agencies.

Attribute	What Difference It Makes
Citizen-led Council	<ul style="list-style-type: none">• Ensures a common sense approach.• Representation from each of the state’s major child-serving agencies and the four legislative caucuses creates opportunities to leverage other state efforts benefiting children.
Children’s Trust Fund	<ul style="list-style-type: none">• A ‘public charity’ (managed by the WCPCAN Council) whose funds are held outside the state general fund.• Facilitates private sector investment to extend the reach of publicly-funded prevention.
Office of the Governor	<ul style="list-style-type: none">• Access to the highest level of state government.• Outside of departmental bureaucracies and politics.
Laser-like focus	<ul style="list-style-type: none">• A clear (if hugely complex!) task to accomplish
Revenue-generating capacity	<ul style="list-style-type: none">• Sales of the Washington State Heirloom Birth Certificate, a consumer product/legal document, bring private dollars into the funding mix.• ‘Keep Kids Safe’ Special License Plate (anticipated, 2006) will add opportunity to attract additional consumer dollars.

In order to dramatically reduce child abuse and neglect in Washington, WCPCAN aggressively promotes strengthened child abuse and neglect prevention partnerships, policies, programs and practices in Washington.

Our objectives:

- Increase community capacity for effective prevention.
- Raise awareness of the problem and understanding of the solutions.
- Identify and advocate for solutions to systemic problems.

What we do	Examples of the value added
Identify needs, gaps and barriers	<ul style="list-style-type: none">• A clear picture of populations that are missing out on services and of effective services that are missing from the mix.• Policy proposals and problem solving that reflect realities 'on the ground.'
Develop and share resources	<ul style="list-style-type: none">• Federal "Community-Based Child Abuse Prevention" grant (approximately \$400,000 annually).• Partnerships supporting cross-sector training opportunities.
Facilitate access to capacity building resources	<ul style="list-style-type: none">• Website as a one-stop electronic clearinghouse for current information on child abuse and neglect prevention.• Mini-grants for underserved communities to stimulate community problem-solving.
Promote awareness of solutions	<ul style="list-style-type: none">• With Children's Hospital and Regional Medical Center and other key partners, leadership of the statewide Shaken Baby Syndrome (SBS) prevention awareness and education campaign.• Statewide annual child abuse prevention campaign.
Fund and support outcome achievement	<ul style="list-style-type: none">• Grants to programs with the greatest potential to achieve identified outcomes.• A full menu of support services (training, TA and consultation) available to grantees and other community-based prevention programs.
Evaluate and communicate results	<ul style="list-style-type: none">• Regular evaluation of funded programs' progress towards outcome achievement.• Indicators to track organizational performance and inform practice, program, and policy decisions.

why it matters

WCPCAN serves as the identified state lead for the prevention of child abuse and neglect in Washington. We believe this is some of the most important work that the state can do.

Abuse and neglect affects thousands of Washington's children each year.

61,274 of Washington's children were involved in referrals accepted by Child Protective Services for investigation in 2003.

The link between adverse childhood experiences and negative impacts later on in life has been well documented. Research affirming the effectiveness of carefully targeted, well implemented prevention programs has also been firmly established.

Prevention is cost effective – a point made in the 2004 Washington State Institute for Public Policy Report "The Benefits and Costs of Prevention and Early Intervention Programs for Youth."

"There is credible evidence that certain well-implemented programs can achieve significantly more benefits than costs."

Implementation of effective prevention programs is in fact the *only* way to avoid the costs that increasingly drain public coffers: foster care, crime, school failure, substance abuse and health/mental health care.

maximizing impact: our focus on children birth to age 3

WCPCAN's new, sharpened focus on children 0-3 speaks directly to the greatest opportunities and challenges in child abuse and neglect prevention.

The challenges are obvious. Children from birth to age three:

- have the highest victimization rates
- are the most likely to experience a recurrence of maltreatment
- are the most likely to die from the abuse and neglect they experience. (Death by maltreatment rivals congenital anomalies as the second leading cause of death of children ages 1 – 4 in the US.)

The opportunities are clear as well.

- Advances in research about early brain development and nurturing theory demonstrate the huge potential that exists to positively influence developmental outcomes during the critical first years.
- Parents are most willing to receive information and support during the period of critical life change the birth of a first child represents.

the bottom line

Child abuse and neglect are preventable. WCPCAN has the expertise to continue to lead the way to strengthen Washington State's policies, programs, practices and partnerships that protect children. Investing limited state resources wisely now with an eye to the long term will strengthen families, promote optimal child development and reduce the huge public costs related to the consequences of abuse and neglect.

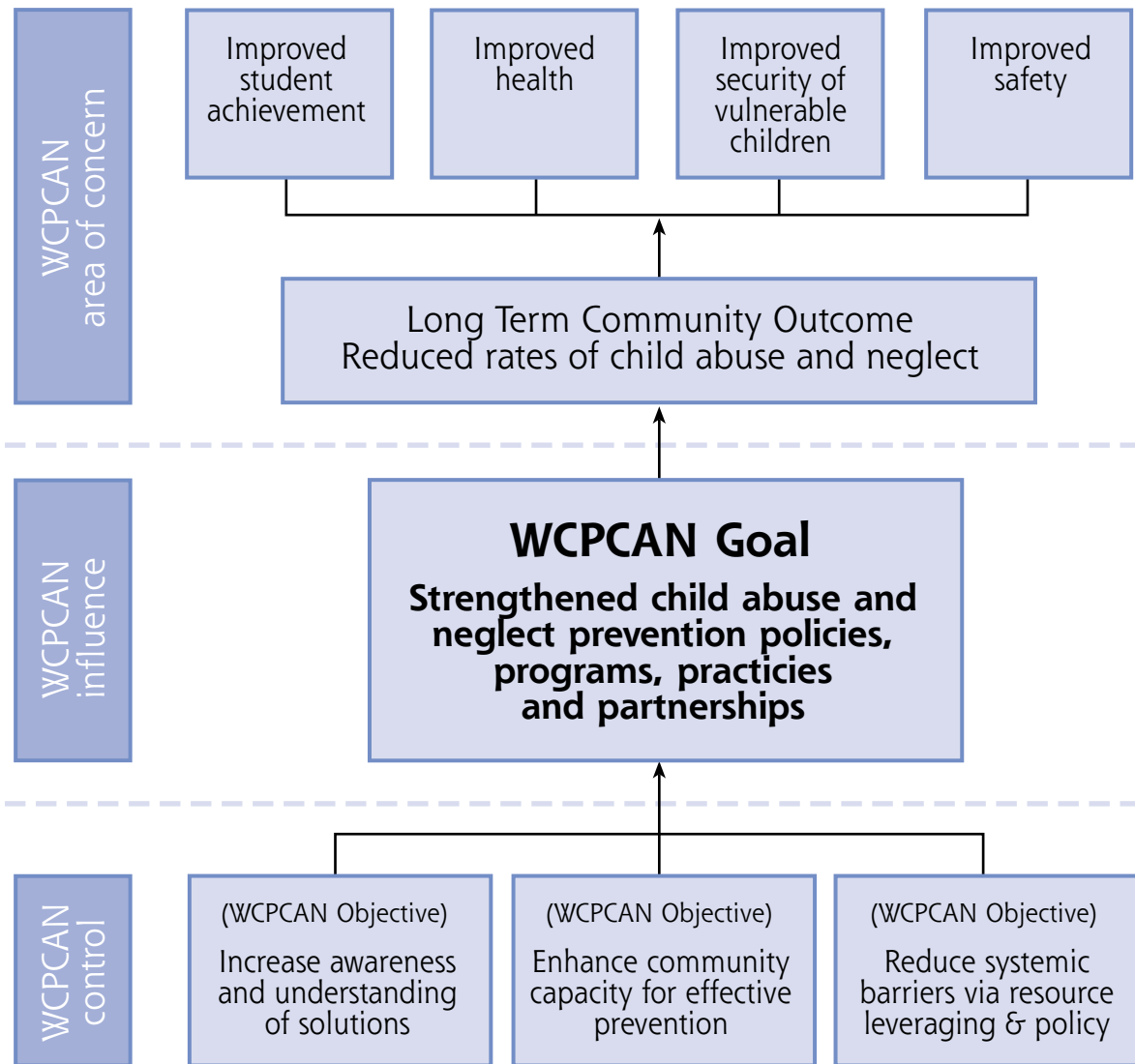
Because of WCPCAN's work, Washington has more effective public policies and better local prevention programs.

Through partnerships, public awareness, building and sharing a knowledge base, and providing resources, WCPCAN serves as a multiplying force to help everyone involved in child abuse and neglect prevention be more effective.

" Investing in human capital breeds economic success not only for those being educated, but also for the overall economy. "

– Art Rolnick, Federal Reserve
Bank of Minneapolis

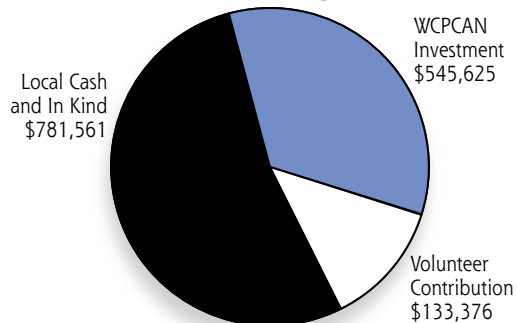
relationship between wcpcan goals & statewide results



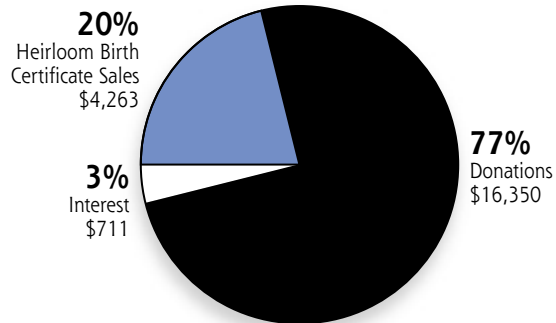
■ NOTE: The 2004 WCPCAN "Ounce of Prevention" report (http://www.wcpcan.wa.gov/temp_2004_report.asp) provides detailed information, including research references, on the proven link between child abuse and neglect and outcomes related to school performance, health (including mental health and substance abuse) and crime and delinquency.

How We Define 'Capacity-Building' (With thanks to the Institute of Medicine: "Capacity describes the mix of conditions (shared values, quality of programs and strategies, program congruence with community needs, and political support) and resources (knowledge, skills, money, time and technical assistance) necessary for communities and community coalitions to accomplish and sustain change.")

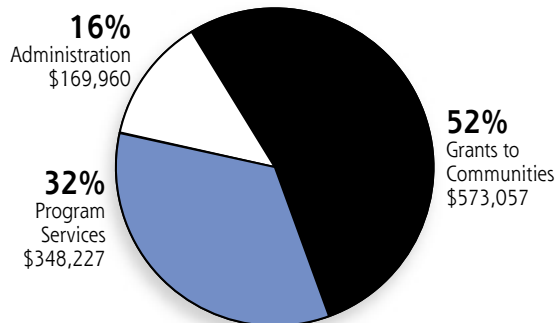
Total \$1,460,562
Resources Leveraged SFY 04



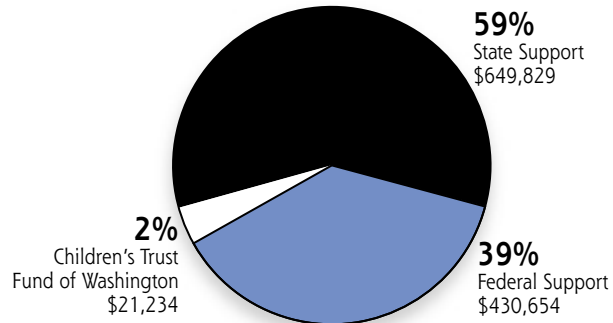
Total \$21,324
Children's Trust Fund Revenue SFY 04



Total \$1,091,244
Expenses SFY 04



Total \$1,101,717
Revenue FY SFY 04



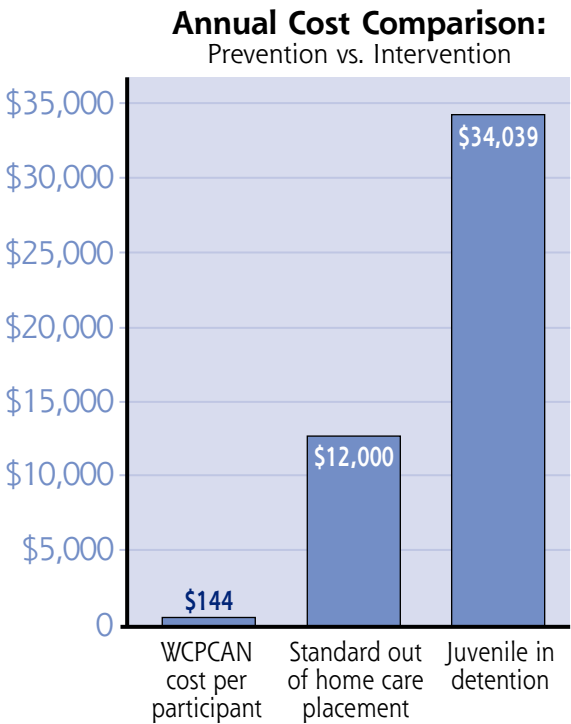
effective prevention saves money

Our focus on outcome evaluation and investment in research-tested approaches has significantly improved child abuse prevention practice over the years. The outcomes reported by WCPCAN-funded programs show that these programs make a significant difference in the lives of vulnerable families and contribute to the prevention of child abuse and neglect in Washington.

cost benefit

A 1998 Rand Institute report asked the question, "Might government funds invested early in the lives of some children result in compensating decreases in government expenditures? The answer to this question is YES."

But for every dollar Washington State spends on preventing child abuse and neglect, \$321 is spent on after-the-fact interventions like foster care and treatment.



Seventeen community based programs were funded at a total of \$545,621 during SFY 03-04. This equates to an average WCPCAN cost of \$144.12 per participant.

Programs funded by WCPCAN are required to leverage community resources to support their program. This year, WCPCAN funding was matched by local community investments totalling \$778,209 to support these prevention programs.

the consequences of maltreatment

Research has clearly established that maltreatment can have serious lifelong consequences for the children who experience it, with impacts that reach deep into our communities.



Crime

Child abuse increases chances of both juvenile and adult crime:

- Youth who experienced maltreatment during childhood were significantly more likely to display a variety of problem behaviors during adolescence, including serious violent delinquency, teen pregnancy, drug use, low academic achievement, and mental health problems. ("Youth Development Series: In the Wake of Childhood Violence," Washington DC: National Institute of Justice, 1997)
- Children who have suffered abuse or neglect are arrested four to eight times more often for juvenile crimes and are twice as likely to be arrested as adults. (Department of Social and Health Services, Children's Administration's Office of Research. Unpublished study funded by the National Institute of Justice. Preliminary results reported in the Seattle Post-Intelligencer, June 26, 2000)

According to University of Washington noted researchers, David Hawkins and Rick Catalano, inadequate parenting practices are "among the most powerful predictors of early antisocial behavior."



School Failure

Depending on what is being assessed, anywhere from one-quarter to more than one-half of young children are not ready to be successful when they begin kindergarten.

Child abuse increases the risk for school failure:

- Young children who have been maltreated participate less in classroom activities, are less likely to be accepted by classmates and teachers, and receive less instruction. They are more likely to do poorly on academic tasks and more likely to be held back. ("Ready to Enter: What Research Tells Policymakers About Strategies to Promote Social and Emotional School Readiness Among Three- and Four-Year-Old Children," National Center for Children in Poverty, 2002.)
- A study of abused and neglected children found that they had lower grades, more suspensions, disciplinary referrals, grade repetitions, and were more likely to drop-out of school than their peers, independent of the effects of poverty. (School Performance and Disciplinary Problems among Abused and Neglected Children, Journal of Developmental Psychology, 1993)



Substance Abuse

Experiencing child abuse increases risk of alcohol and substance abuse:

- A strong link exists between negative childhood experiences and illicit drug use later in life. The greater the number of negative events experienced, the more likely the individual is to initiate drug use at an early age, have drug problems, be addicted to drugs, or use intravenous drugs in adulthood. ("Relationship of Childhood Abuse & Household Dysfunction to Many of the Leading Causes of Death in Adults: The Adverse Childhood Experiences (ACE) Study." American Journal of Preventive Medicine, 1998.)



Mental Illness

- Maltreated children are 25% more likely to suffer from mental illness. (National Institute of Mental Health, 2000).
- Children who are physically abused are more likely to have suicidal thoughts, conduct disorder, a poor self-image and show signs of depression.
- Psychiatric, eating, and substance dependence disorders have been shown to be strongly associated with childhood sexual abuse. The severity of the disorders increases with the severity of the abuse. ("Childhood Sexual Abuse and Adult Psychiatric and Substance Use Disorders in Women," Archives of General Psychiatry Oct. 2000)

"We have to recognize adverse childhood experience as a very important component of adult health."

– Maxia Dong, medical epidemiologist,
U.S. Centers for Disease Control and
Prevention, HealthDay, Sept. 20, 2004



Impaired Brain Development

- New brain imaging surveys and other experiments have shown that child abuse can cause permanent damage to the neural structure and function of the developing brain itself. ("Scars that Won't Heal: The Neurobiology of Child Abuse," Scientific American, March 2002.)
- Healthy bonding between a child and his or her parents/caregivers actually creates a chemical buffer in the child's brain that protects it from 'shutting down' in reaction to stress. A shut down brain is a brain that isn't learning.



Poor Physical Health

- Childhood abuse and household dysfunction lead to the development decades later of the chronic diseases that are the most common causes of death and disability in this country, including heart disease, cancer, chronic lung and liver disease, and injuries. Many of the most common causes of death and disability in this country may be linked to adverse emotional experiences in childhood. ("The Effects of Adverse Childhood Experiences on Adult Health and Well Being," American Journal of Preventive Medicine, May 1998)



Teen Pregnancy

- Many (as many as two-thirds) of the young women who become pregnant as adolescents were sexually and/or physically abused at some point in their lives – either as children, in their current relationships or both. (Interpersonal Violence and Adolescent Pregnancy: Prevalence and Implications for Practice and Policy, Center for Assessment and Policy Development, 2001)
- Teenage pregnancy risk is strongly linked to sexual abuse, especially for males and those who have experienced both incest and nonfamilial abuse. Reports of pregnancy involvement were significantly more common among abused adolescents (13-26% of females and 22-61% of males, depending on type of abuse) than among nonabused adolescents (8-10%). Teenagers reporting both [incest and nonfamilial sexual] abuse types had the highest odds of pregnancy involvement and risk behaviors. (Perspectives on Sexual and Reproductive Health, 2004.)

research-driven investment

Three Legs of a Stool:

How WCPCAN Uses Research and Evaluation

How do you know if a prevention program is strengthening families' ability to avoid abusing or neglecting their children? WCPCAN uses information produced by three separate but complementary types of research to ensure that their investments contribute to the reduction of child abuse and neglect in Washington State.

Basic Research: What are the characteristics of families that are safe and healthy for children?

Basic research is conducted by research organizations such as universities in order to increase knowledge about what skills, knowledge, attitudes and supports for parents will contribute to a family environment that is safe and healthy for children. The purpose of basic research is to provide explanations that apply to families or groups of families in general and the standards of evidence are very high.

WCPCAN selected eight protective factors that basic research has shown reduce the risk of child abuse and neglect. These protective factors include: non-punitive discipline and guidance; a responsive social network; stress management; nurturing and attachment; knowledge of child development; effective problem solving; effective communication; and life management skills. Effective child abuse and neglect prevention programs work to increase these protective factors for families. All WCPCAN-funded programs are required to demonstrate how their work impacts at least one of these protective factors for the families they serve.

Experimental Research: What kinds of activities can help create families and environments that are safe and healthy for children?

Like basic research, experimental research is usually conducted by research organizations that can meet rigorous scientific standards and have access to the resources and funding required for such studies. Experimental research uses a comparison or "control" group to compare the impacts of specific services (e.g., curricula and activities) with the impact of different services or no services at all.

While research using an experimental design is integral to increasing knowledge about effective child abuse and neglect prevention, there are some limitations to directly and universally applying the lessons of such research to practice. Experimental designs work best to describe the results of programs with discrete, predictable, easily automated and/or quantifiable activities – characteristics which describe some, but not all, effective child abuse and neglect prevention programs. Conducting experimental research is expensive (from 25 to 100% of program costs) and time consuming. Finally, data from experimental research often are not available for many current curricula and activities and may not be available in relation to specific ethnic, cultural or geographic populations.

WCPCAN values the lessons from experimental research but also values the ability of local programs to adapt to the complex and dynamic needs of the families they serve. Recognizing the limitations of experimental research, WCPCAN guides programs toward curricula or activities shown to be effective through experimental research but does not restrict programs to such practices.

Outcomes Based Evaluation: How have the specific activities of this program changed families and environments to improve the health and safety of children?

An outcome-based evaluation produces data specific to a program's activities and the changes those activities produce for the families they serve. While most service-providing organizations do not have the capacity – nor is it their mission – to conduct basic or experimental research, outcome-based evaluation is usually within their reach. Agencies can use these data to improve their programs and increase their ability to achieve their overall goals. Outcome-based evaluations help funders, participants, staff and community-members hold programs accountable for contributing to the prevention of child abuse and neglect.

An outcome-based evaluation is informed by the results of basic and experimental research. Basic research and experimental research provide information about the link between program curricula and activities, outcomes (such as the WCPCAN protective factors) and the achievement of a larger goal (such as the prevention of child abuse and neglect). Through the use of a logic model, outcomes-based evaluation defines and provides a framework for measuring specific programs and the outcomes achieved for that program's participants. All three types of research, used together, help all stakeholders know that a particular program is contributing to the prevention of child abuse and neglect.

WCPCAN requires that each program it funds engage in outcome-based evaluation to demonstrate the program's impact on one or more of the protective factors identified through basic research. All programs receive individualized technical assistance and training to increase their internal evaluation capacity and help them meet the evaluation requirement.

Three legs of a stool: A solid foundation

WCPCAN puts the unique insights produced by basic research, experimental research and outcome-based evaluation to excellent use. WCPCAN helps programs use findings from the fields of basic and experimental research and builds programs' capacities to collect and use data that are specific to their programs, participants and communities. With three solid legs of research as a foundation, WCPCAN maximizes each program's potential to support families and keep children safe.

Kasey Langley, Organizational Research Services

www.organizationalresearch.com

portfolio of programs

WCPCAN began investing in communities committed to developing and sustaining effective child abuse prevention efforts in 1982. Since then, WCPCAN has funded a total of 182 prevention-based programs at 161 different agencies.

The programs WCPCAN funds serve populations that statistically demonstrate multiple risks associated with child abuse and neglect. However, as our role is prevention, we maintain that no more than 20% of the families we serve can be involved with Child Protective Services.

WCPCAN-supported programs are selected based on prevention research, standards of best practices, ability to demonstrate program outcomes and capacity to leverage resources within their community.

Based on the research of what works best to prevent child abuse and neglect, WCPCAN invests in the following types of programs:

- **Home visitation programs** that provide services to vulnerable families with infants and young children.
- **Parent education programs** that use a formal structure and curriculum to help parents develop and refine parenting skills.
- **Parent support activities** that provide parents a social support network and environment to increase positive parenting skills.
- **Crisis nurseries** that offer respite care and support to families in crisis.

a common goal: prevention of child abuse and neglect

WCPCAN places a high value on the capacity of community-based programs to report program outcomes to ensure that state dollars invested in prevention services are producing real results.

Based on current research, we seek outcomes in eight protective factor goal areas that have been shown to make the most difference in determining a child's chances for growing up in a protective environment. Programs that develop and support these protective factors have the greatest chance of preventing child abuse and strengthening families.

The programs we invest in must address and achieve positive outcomes in at least one of the protective factor goals areas:

Nurturing & bonding

Activities that teach parents and caretakers to respond appropriately to the basic needs of their babies and young children.

Responsive social network

Activities that reduce social isolation and assure families the ability to access needed formal or informal community resources.

Knowledge of child development

Activities that teach parents and caretakers appropriate guidelines in their child's development, how to recognize if their child needs special help; and awareness of new research in child development and how to promote healthy development.

Effective problem solving

Activities that teach parents and caretakers to recognize who owns a problem and how to effectively solve it.

Effective communication

Culturally appropriate (relevant and/or sensitive) activities that teach parents and caretakers positive communication and listening skills.

Non-punitive discipline and guidance

Parents and caregivers learn developmentally-appropriate and culturally-relevant discipline and guidance methods.

Life management skills

Program services are designed to assist participants in developing skills that will help them effectively manage their daily lives, and increase family stability.

Stress management

Stress management education can include awareness raising (ways to minimize environmental and relational stressors), stress reduction strategies (physical and emotional), and techniques that build family capacity to manage stress (social networks, goal setting, healthy habits).

a capacity-building perspective

Sustainability is dependent upon accountability. We work in partnership with our funded programs to develop their technical abilities and understanding of the value associated with service evaluation and achieving demonstrated outcomes in child abuse prevention. As stated by a representative of one of our funded programs, "WCPCAN expects excellence from us but you also provide us the tools to be an excellent program."

We support:

- Logic model development, measurement tools, data collection and reporting
- Specialized training
- Development of internal quality assurance
- Increased program ability to demonstrate their success

WCPCAN has received both statewide and national recognition for leadership in capacity-building strategies benefiting community-based programs. We do not simply fund programs, but rather provide knowledge and expertise guiding program development, training, and technical assistance.

We believe this level of investment is the best means to assure that community-based prevention programs remain sustainable once our cycle of funding has been completed.

By supporting research-based community programs, WCPCAN takes an active role in front-line prevention that has far-reaching effects.

crisis nurseries

Crisis nurseries provide a safe and supportive environment for children at risk for abuse and neglect and serve as a supportive resource for parents and caregivers in times of isolation and crisis. Crisis nurseries achieve this by providing temporary care for young children free of charge for a limited period of time. Programs often accept children at any time, day or night, in order to alleviate emergent risk.

Crisis nurseries also provide support services to families which may include the following:

- service coordination (case management)
- parenting classes
- access to medical services
- home management training
- resource and referral information

a wcpcaan investment #1

grays harbor children's advocacy center – rainbow house crisis nursery – grays harbor county

The Rainbow House Crisis Nursery serves low-income parents with children birth to eight years of age. The project provides emergent child care services 24 hours per day, seven days per week. A family self-sufficiency component is offered to families in both home-based and center-based settings to provide parent education and support. Every family has the opportunity to develop a Family Action Plan designed to build on family strengths and prevent future needs for crisis services.

Outcome Goal

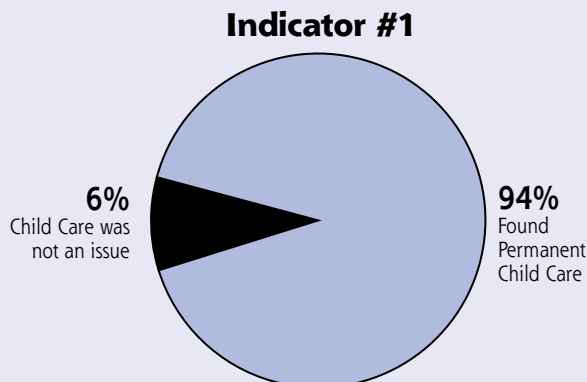
Development of a Responsive Social Network by increasing parent/caretaker ability to access family support services while simultaneously developing informal relationships and supports.

Outcome Data

138 parents were served during FY 03-04. 92 families voluntarily participated in the family support component representing 90% of the total families served.

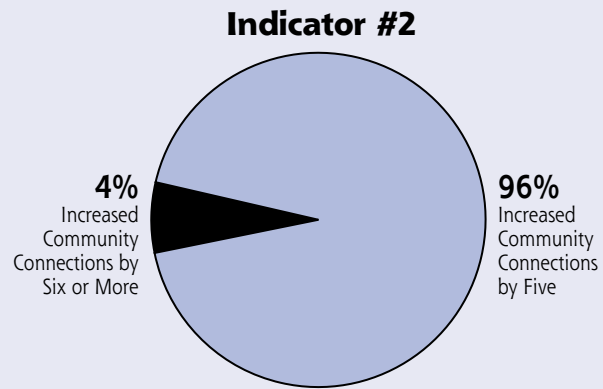
Indicator #1: At least 75% of the families voluntarily participating in the family support component will have established regular, permanent child care services for their children.

This data was tracked and recorded using the Transitional Assessment tool. This tool is used post service/intervention.



Indicator #2: At least 90% of the families voluntarily participating in the family support component will have maintained or increased the number of community connections made as a result of their participation in the nursery.

Examples of community connections include childcare subsidies, early childhood programs, social services systems, primary health care providers, and developmental programs. This data was tracked and recorded using two measurement tools: the Intake Assessment conducted through parent/guardian interviews pre-service/interventions and Transitional Assessment conducted through record reviews and parental/guardian interviews post-services/interventions.



Indicator #3: At least 60% of the families voluntarily participating in the family support component will be able to identify a parenting mentor prior to transition from the nursery.

During SFY 2003, 92 families voluntarily participated in the family support component representing 90% of the total families served. 100% of the families participating in the family support component were able to identify a parenting mentor.

Parenting mentors identified included neighbors, faith-based community, friends and peer support groups and reunification with extended family members. This data was tracked and recorded using two measurement tools: the Intake Assessment conducted through parental/guardian interviews pre-service/intervention and the Transitional Assessment conducted through record reviews and parental/guardian interviews post-services/interventions.

" The Children's Advocacy Center of Grays Harbor is very proud to have been a part of the WCPCAN project and pleased that we have reached our goal to "continue services after WCPCAN dollars are no longer available." We have given WCPCAN and our local community a solid return in their belief and investment to providing a safe, nurturing place where children can breathe, stretch and grow and families can feel safe and better able to care for their children.

We believe that because of the services that we have been able to provide to families that fewer children in Grays Harbor have been abused and or neglected. **"**

– Sue Bucy, Director, Rainbow House Crisis Nursery

parent support

Parent support services utilize a variety of strength-based approaches to enhance protective behaviors in parenting. Parent support is flexible to the needs of the parent and offers a continuum of services that promote healthy behavior. Activities range from crisis, individual and group therapeutic support, one-on-one mentoring to stress-reduction activities.

a wcpcaan investment #2

cocoon house, project SAFE; snohomish county

Cocoon House provides prevention services to parents of adolescents age 11 and older and parents in the Early Childhood Education Assistance Program. A clinician staffed phone line, support groups and parent training workshops all aim to decrease parental stress and improve parental communication skills.

Outcome Goal

Improved Stress Management

Indicators

- A) Parents/caretakers indicate increased level of hope that the situation with their teen can get better.
- B) Parents/caretakers indicate a decreased level of personal frustration.
- C) Parent/caretakers indicate a decreased perception the teen will leave the home.

Outcome Goal

Indicator Averages

Parents Reporting Level of Hopefulness, Frustration and Perception

	Hopefulness	Frustration	Perception Teen Will Leave
Pre-Phone (A)	3.72	3.75	3.12
Post-Phone (A)	4.37	2.53	2.58
Phone (B)	4.06	2.13	2.34

Indicator Improvement Percentages

Percentage of Parents who Reported Improvement

	Hopefulness	Frustration	Perception Teen Will Leave
FY 03-04 Post-Phone (A)	51%	70%	42%
FY 02-03 Post-Phone (A)	52%	55%	45%
FY 03-04 Phone (B)	35%	77%	29%
FY 02-03 Phone (B)	37%	45%	38%

parent education

Parent education is an effective method of changing adverse parenting behavior, increasing parental knowledge of child development and increasing knowledge and usage of non-punitive discipline techniques.

a wcpca investment #3

yakima valley farmworkers clinic, spanish language parent education program; yakima county

The Spanish-language Parenting Education Program utilized “Los Ninos Bien Educados” curriculum targeting low-income Spanish-speaking families. The curriculum is covered in 12 three-hour sessions taught by a team of two certified instructors. The curriculum is culturally-specific to meet the needs of newly-immigrant families. Content includes developing non-punitive discipline skills, improving family communication and helping families communicate with the school system.

Outcome Goal

Increase parents/caretaker’s use of non-punitive and disciplinary strategies.

Indicators

1. Use of positive guidance techniques
2. Use of family meeting time

Outcome Data

The total number of respondents to the questions addressed in the evaluation process was 121 (n = 121).

In the last month, what types of discipline have you used in your home? How well does it work for you?

Discipline / Guidance Technique	Pre	Post
Time Out <small>Outcomes (e.g. 75.53% of the participants checked “works well” or “works sometimes” for Time Out).</small>	33.88	78.51
Redirection	50.41	85.12
First you must, then you can	52.89	85.95
Show and Tell	62.80	90.90
Praising	46.28	92.56
Family talk	47.10	84.29

How often in the last month have you sat down as a family to talk and make decisions?

	Pre	Post
5 or more times	.06	.16
3-4 times	.28	.49
1-2 times	.45	.19
Never	.17	.04

Do you think “family meetings” increased family communication?

	Pre	Post
Yes	63.63	84.29
Sometimes	24.79	5.78
No	8.26	.80

home visiting

Home visiting works as part of a comprehensive system of integrated care. Home visiting has been demonstrated to be most beneficial for highly stressed families and should begin as early as possible as the early years of a child's life present the greatest opportunity to promote healthy development and prevent harm.

a wcpcaan investment #4

first step family support center, supportive parenting project; port angeles, clallam county

This program provides intensive parent education and support services to parents who have developmental disabilities or other cognitive limitations and are raising their children. Weekly home visiting services are provided.

Outcome Goal

- Increase parent's understanding of their children's developmental needs
- Increase parent's capacity to respond appropriately to their children's developmental needs.

Emphasis is placed on providing nurturing emotional environments, providing safe and healthy living environments and providing the appropriate situation for maximizing cognitive growth.

Outcome Data

During the three years that the First Step Supported Parenting Program was funded by WCPCAN, services were extended to 16 families.

- Number of children: 26
- Marital status: 9 two-parent families; 7 single moms; 1 single dad
- CPS referrals: Over the 3-year period, there were 10 CPS referrals with no dependencies filed; all referrals were for neglect/failure to protect
 - One child was relinquished by parent to her family
 - Two children from one family were taken into care after they left this area
 - Two children who were in CWS care when the program began have been reunited with their parents and the dependencies dismissed

“ Forty to 60% of children in families headed by a parent who has developmental disabilities are removed from parental custody. Families in our program actually had a net gain in the number of children in parental custody. Incidents of reported maltreatment, all of which were allegations of neglect or failure to protect, were dealt with immediately and aggressively. In a majority of CPS referrals, the parents came to regard CPS as an ally and were able to access resources otherwise unavailable, such as Section 8 vouchers, child care, counseling. ”

– Janet Proebstel, Supportive Parenting Program Coordinator

Agencies who serve these families expected the program to have a high rate of turnover and a high rate of absenteeism. This was not found to be true for these participants. In addition to the low turnover, there was a very high participation rate. Once a relationship was established with the family and a regular meeting time set, the “no show” rate was virtually zero.

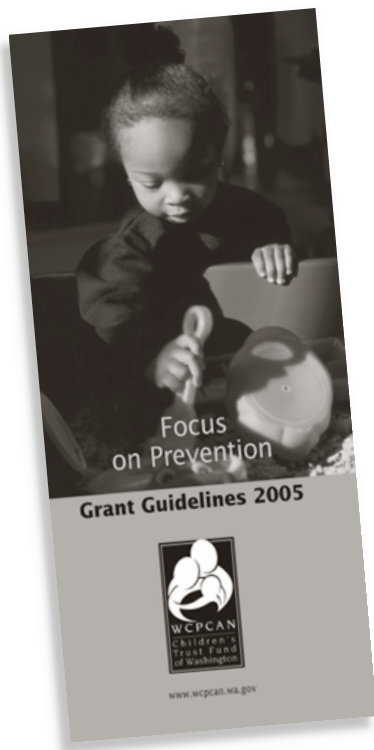
Home visitors in this program, using a relationship-based approach, were able to increase parental competence, assist families in building social networks that supported their parenting, and maintain parent engagement in the program.

The full, detailed outcome report for this and other WCPCAN-funded programs is available on the WCPCAN website, www.wcpcaan.wa.gov.

“ It would be a living nightmare knowing nobody was out there to help people. Nobody would know how to be a parent. Like if he’s stuck at school you guys help out. Who wants their kid taken? You take us to meet teachers.

First Step tries to help people who need help very badly to try to keep CPS from taking their kids. If it wasn’t for you guys we wouldn’t have this precious person here. **”**

– Kris and Wayne, Supportive Parenting Project Participants



the gold standard of child abuse & neglect prevention

Because of the rigor of the grant application process and the high standards of our evaluation requirements, receiving WCPCAN funding is regarded as a gold standard for prevention programs in Washington. Being selected for WCPCAN investment opens doors to private dollars for our grantees.

“ I have not worked with any more helpful funder in all of my grant work throughout the years than WCPCAN. ”

– San Juan Island Family Resource Center

20-year retrospective survey

One of WCPCAN's principal claims as to the value we add with state tax dollars is the contribution we make to developing sustainable as well as effective community-based child abuse and neglect programs. This year, WCPCAN tested the truth of that claim by surveying the programs we had funded over the years.

WCPCAN made its first grants in 1982. Since then, we have funded a total of 182 different programs at 161 unduplicated agencies across Washington's 39 counties.

Our survey identified 103 former grantees. (The 20 plus years that have passed since those early grants made it difficult to obtain data from some organizations.) Our response rate to the 103 surveys we distributed was 33%.

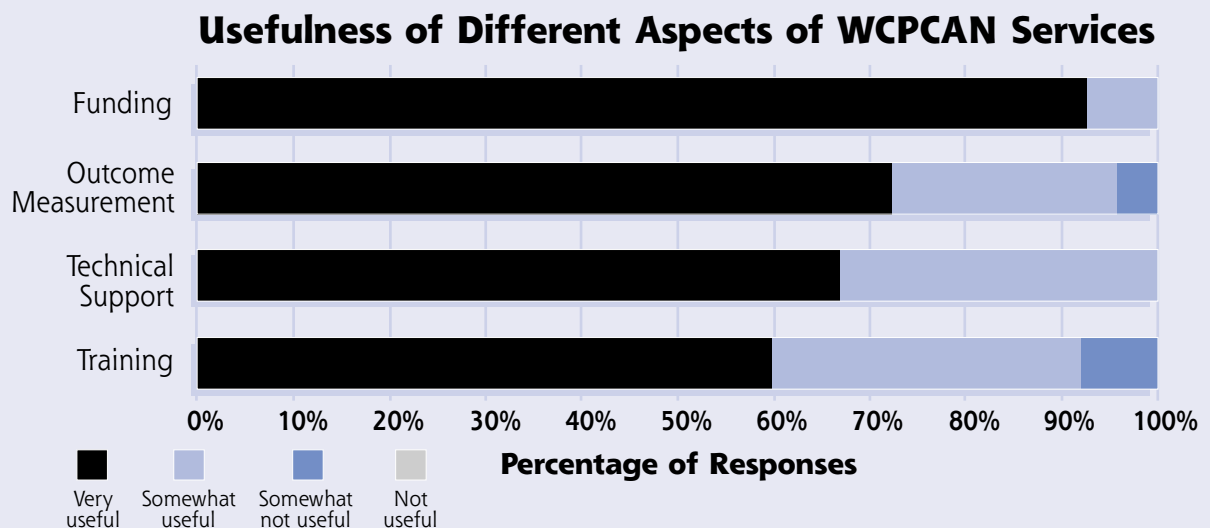
Of the responses we received, 38% were in rural and disconnected areas of Washington; 85% of programs had a target population of parents with children under age five, 12% targeted teen parents with children under three, and 3% targeted parents with children over 11.

Responses to the survey highlighted several areas of strength in WCPCAN's capacity-building approach to grant making.

" Through involvement with WCPCAN we began a larger focus on prevention and giving families the tools and resources they need to produce a healthy family dynamic. Since 2000 we have given an average of 3 to 4 presentations a month on child abuse and neglect prevention to church groups, civic organizations, agencies and organizations throughout Clark County. "

– Vancouver Crisis Nursery and Family Support

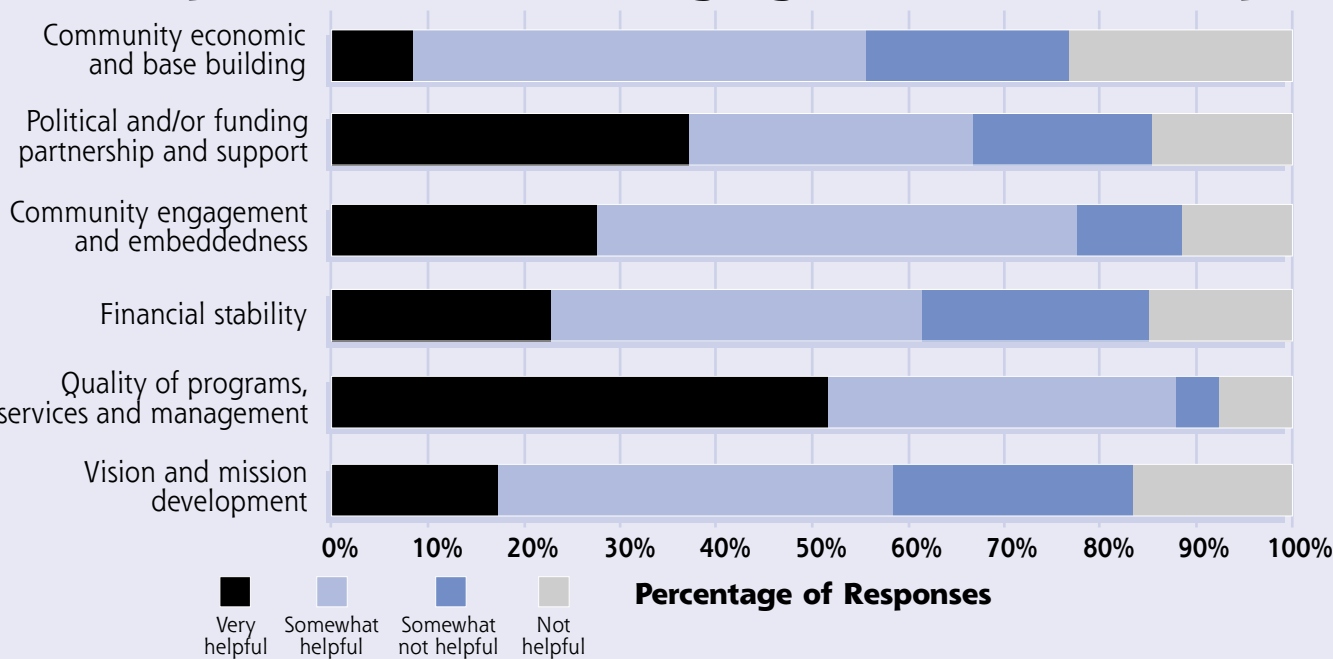
21



key findings

- Changes that resulted in increased capacity were evident in 76% of the respondents. In spite of all tight budget times and other challenges facing community-based non-profits, 35% actually expanded their ability to serve clients.
- Respondents reported that receiving WCPCAN support assisted them in becoming more competitive in obtaining other funding. 66% of the programs reported an increase in their scope towards prevention.
- The assistance WCPCAN offers in helping community-based programs measure their success is highly valued. 17 respondents pointed specifically to WCPCAN's assistance with outcome evaluation as helping set their foundation for success, both in attracting other funders and within their programs.

Helpfulness in Areas of Building Organizational Sustainability



other ways we help

Other ways that WCPCAN contributes to the sustainability of local child abuse and prevention programs were identified by survey participants.

- Building community engagement with prevention issues is important to sustaining programs, as well as to building healthier communities. WCPCAN is seen as contributing to this through our leadership of such efforts as the statewide child abuse prevention campaign that peaks in April, national Child Abuse Prevention Month.
- Promoting financial stability is the single most important aspect of capacity building for local prevention programs. WCPCAN was recognized as helping programs focus on the need for long range funding strategies. WCPCAN helped programs make the connection between solid outcome measurement and success with other potential funders.
- Building the knowledge base is also seen as a WCPCAN value-add by community-based programs. WCPCAN serves as a trusted resource for information about constantly-evolving research and 'best practices' within the child abuse and neglect prevention field.

improving on a solid track record

Each year, WCPCAN tests the effectiveness of the support we offer by closely surveying the programs in which we invest money, expertise and time. This year's comprehensive retrospective survey took this accountability process one step further.

While WCPCAN has received both state and national recognition for leadership in capacity building strategies benefiting community-based programs, the survey shows that we must continue to strengthen our efforts if we are to achieve our goal of building sustainable, effective community-based prevention efforts

We've started with a series of outreach visits to high need, less-assisted parts of Washington, including the northeastern corner of the state, the Yakima valley, Grays Harbor-Hoquiam, and mid-state communities. Through our outreach, we hope to identify and assist communities committed to growing their child abuse and neglect prevention efforts.

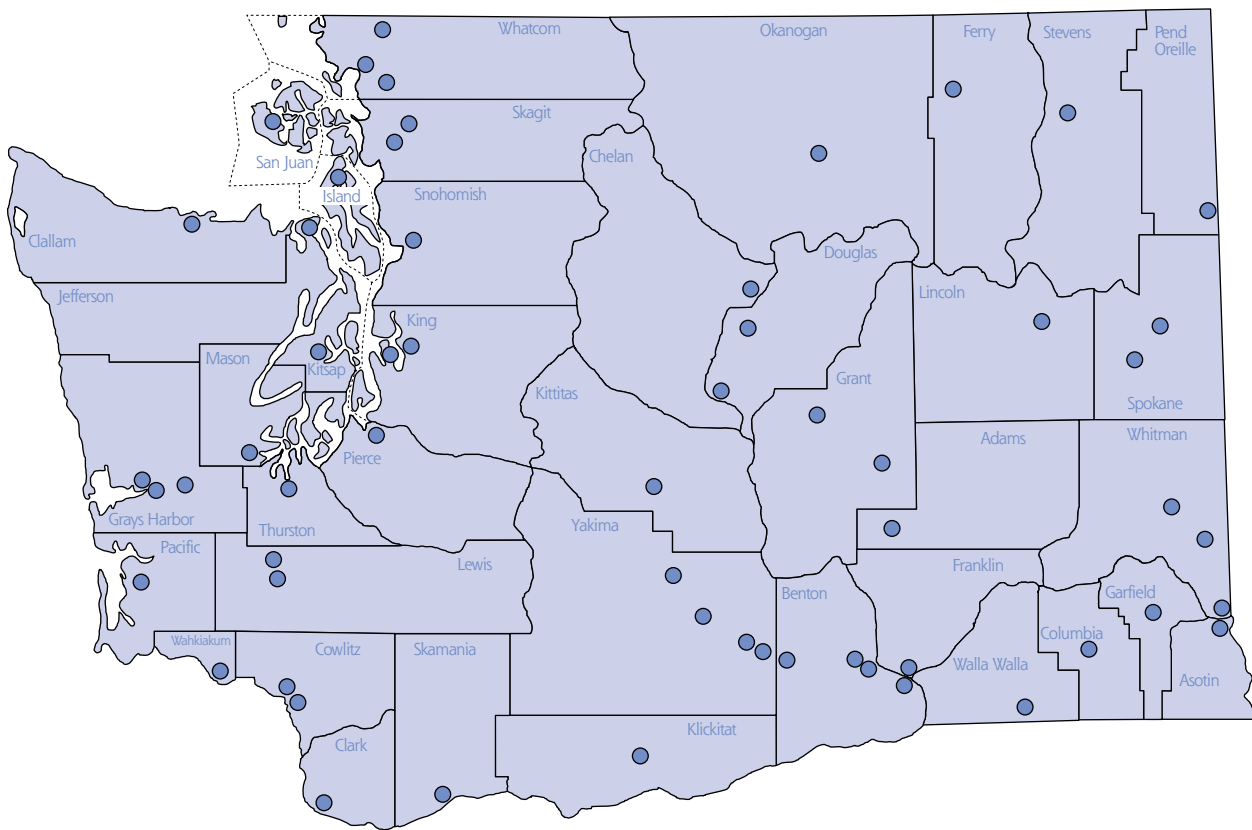
We are also looking more carefully at the training we support to insure that our dollars are being used to provide the skill- and knowledge-building programs have said they most need.

With funding being the most valued resource we provide, we are stepping up efforts to gain new resources for prevention. More money will buy more prevention capacity. We are both developing innovative methods to leverage private dollars and seeking through policy to create a better balance between prevention and more expensive after-the-fact intervention.

" Our organization is the only private non-profit located within the county and administers numerous programs for families and children. Involvement with WCPCAN developing family support services led to clarity that FSS (Family Support Services) is a program priority for the board. "

– St. James Family Center, Cathlamet

wcpcan-funded programs 1982-2004



In addition to funding, WCPCAN provides knowledge and expertise, working in partnership with programs to help them achieve improvements on specific indicators linked to child safety and well being. We believe this level of investment is the best means to assure that community-based prevention programs remain sustainable once our funding cycle has ended.

first-year funded programs (grants up to \$50,000)

Abused Deaf Women's Advocacy Services – Positive Parenting Program

Parenting classes, workshops, and one-on-one mentoring for deaf parents with children aged birth to five and older. The program is targeted to increase parents' knowledge of child development and increase parents' non-punitive discipline and guidance skills. Parenting classes offered in King, Pierce, and Snohomish counties.

Child Care Action Council – Continuum of Family Support to Prevent Child Abuse and Neglect in Ethnic Communities

A collaboration of communities of color, faith-based and nonprofit organizations in Thurston County to build a continuum of support to prevent child abuse and neglect among ethnic minority families and families in crisis. Includes emergency child care for families in crisis, parent education and support, home visitation and leadership training with the support of community partners and volunteers.

Martin Luther King Jr. Family Outreach Center – Welcome to the Circle

Design and development of an innovative, culturally sensitive, child abuse and neglect prevention program to educate Spokane County parents and adolescents on the importance of attachment, reduce their anxiety about seeking intervention, increase empathy and positive attributions of children by parents and adolescents, and provide a culturally appropriate modification of the Circle of Security protocol. Session groups provide experiential video-based education to low-income families at the MLKJ Center and to teenagers and parents using the YFA Connections Crisis Residential Center.

Parent Trust for WA Children – Strengthening Fragile Families Initiative

Home visiting services and ongoing parent support for Spanish-speaking Latino families and fathers in Yakima County. Combines three programs designed to increase non-punitive discipline and guidance skills: Intensive Parent Training and Support (ITPS), the Support Group Network and the toll-free statewide Family Help Line.

Wonderland Developmental Center – Strong Parents, Strong Families

Education and support for families with children aged birth-to-three with disabilities. Weekly parent-education support groups to increase King County families' ability to nurture and attach utilizing the Promoting First Relationships curriculum. Parents learn about their child's development and needs, positive discipline, communication skills and gain knowledge of resources. Parent-child coaching directly and through video-taped group learning.

second-year funded programs (grants up to \$35,000)

Children's Home Society of Washington – The Fathering Project

Development of a model for father involvement in the King County Early Head Start Program toward the goal of increasing father's knowledge of child development and creating a strong peer network that values and celebrates their unique contributions. Over the three year period, CHS will expand the model to all agency programs throughout the state.

Children's Home Society of Washington – Parent Aide Program

Volunteer parent mentoring program targeting low-income, Hispanic and kinship families in Walla Walla County. Program objectives are to increase parent's knowledge of childhood development and use of non-punitive discipline and guidance skills.

Friends of Youth – PAT (Parents as Teachers) Healthy Start Project

Enhanced home visiting services for North and East King County parents age 22 or younger who are parenting their first newborn and services continue to age three of the child. Integration of the PAT curriculum (an empirically-founded best practice approach specifically designed to strengthen the social, emotional, cognitive, linguistic, and brain development of the children of young families) into Healthy Start services.

Jefferson Mental Health Services – Child and Family Resource Center Blossoming Project

Family support program serving Jefferson County low-income and/or single parents. Weekly parent support groups focused on reducing social isolation for rural county residents by bringing families together and promoting use of local resources. Childcare, meals and transportation offered for all class sessions.

Kinderling Center/Washington State Fathers Network – Strengthening Families through Enhanced Father Involvement

Serving fathers, significant male figures and families raising children with developmental disabilities or long-term health care needs. Fathers' programs will be established in Seattle, Wenatchee, Moses Lake/Othello, Bellingham and the Tri-Cities.

Mary Bridge Children's Hospital – Parenting Partnership Program

Abuse prevention program designed to meet the unique needs of medically fragile neonates living in socially disenfranchised households. Through three years of weekly home visits, videotaped parent/child interactions and monthly group sessions, Pierce County parents learn how to provide the consistent, predictable care medically fragile infants require.

Refugee Women's Alliance – Multicultural Refugee and Immigrant Family Project

Serving multiethnic, low income King County refugee and immigrant parents and their children through an assets-based approach. Culturally and linguistically accessible information about non-punitive disciplinary methods, the U.S. education system and community resources.

third-year funded programs (grants up to \$20,000)

Center for Human Services – Family Support for Our ELL Community

Services for North King County Spanish and Asian families whose first language is not English. Family support activities, information and resources for families of varied cultures celebrating their own cultures while understanding their children's issues and needs related to assimilation.

Cocoon House – Project SAFE

Prevention services targeted to Snohomish County parents of adolescents 11 years and older. Clinician staffed phone line, support groups and parent training workshops.

South Seattle Community College – Tukwila Family Place Library

Transforming Tukwila's Foster Library into a center for healthy family development, parent networking and support, parent-child play and life-long literacy. Parent support and education, play space, parent resources and home visits.

Yakima Valley Farmworker's Clinic – Spanish Language Parenting Program

Spanish language parenting education program targeting low-income Spanish speaking families in throughout Yakima County. Uses the "Los Ninos Bien Educados" curriculum, culturally specific to the needs of newly-immigrant, Spanish-speaking families.

YWCA Seattle-King County/Snohomish County – Young Parent Self-Sufficiency

Serving King and Snohomish County low-income African American parents 14-20 years with children pre-natal to 5 years of age. Services will provide access to skilled advocates, GED preparation, 13-week Effective Black Parenting course, domestic violence counseling and referral services.

Investing in human
capital breeds
economic success
not only for those
being educated,
but also for the
overall economy.

– Art Rolnick, Federal Reserve
Bank of Minneapolis



"As a nation, we're simply not taking advantage of how much we have learned about early brain development over the past 40 years. This is not about blaming. This is about sharing responsibility and using scientific knowledge to promote the well-being of babies and young children. "

– Jack Shonkoff, Chair, National Academy of Sciences Neurons to Neighborhoods Committee

section 2



challenges & opportunities

early learning

New information about brain development and an increased focus on early learning and school readiness are changing the prevention landscape.

Increasingly, parents and caregivers are looking for guidance on parenting and accurate information about child development. Building parenting skills and knowledge of child development are essential components of child abuse and neglect prevention. WCPCAN is working with new partners and new technologies to meet this growing need.

early care & education

A recent study examined the relationship between quality early childhood education programs and child abuse and neglect. The finding: a 52% reduction in maltreatment among participating children by age 17.

Research shows the specific attributes of early care and education programs that promote a reduction in abuse and neglect include strategies that:

- Facilitate friendships and mutual support
- Strengthen parenting
- Respond to family crises
- Link families to services and opportunities
- Facilitate children's social and emotional development
- Observe and respond to early warning signs of abuse and neglect
- Value and support parents

Some 60% of young children now spend time in care outside the home. Unfortunately, the type of quality early care and education opportunities that work best to protect at risk children are few and far between.

WCPCAN is working in partnership to help ensure that the developing early care and education system recognizes and incorporates those strategies that best protect children.

child welfare reform

The recent federal review of Washington's child welfare system identified specific areas for improvement. These have since been integrated into the DSHS Children's Administration "Kids Come First" improvement plan. The plan reflects greater awareness of the need for prevention and community partnerships as the first line of defense against child abuse and neglect. Among the resources required for the plan's successful implementation are new knowledge and skills.

WCPCAN has well-established expertise in areas prioritized in the Kids Come First plan: outcome-focused contracting, partnering with families and communities, father engagement and service development.

WCPCAN is committed to contributing to the success of this reform effort. Our proven skills and knowledge can make an important difference.

focus on costs & benefits

The Washington State Institute for Public Policy (WSIPP) recently released a report on “Benefits and Costs of Prevention and Early Intervention Programs for Youth.” For various reasons, it is no easy task to measure either the effectiveness or the cost efficiency of prevention. The study represents an important first step in helping assess which prevention programs represent the best investment for Washington taxpayers.

WCPCAN was an early adopter of a commitment to outcome-focused evaluation. The WSIPP report provides additional evidence that WCPCAN is on the right track in our efforts to assist programs in creating quality evaluation measures and using those measures to make judgments about future investments.

family strengthening & systems change

The type of family strengthening programs that WCPCAN supports – parenting education and support, crisis care, home visiting – are often critical to protecting vulnerable children and enhancing their development. However, they represent only one part of what children and families need to succeed.

Bad child outcomes rarely come from a single source. Usually a mix of factors, both risk and protective, combine to produce them.

Many families have multiple needs and are involved with several different parts of the system. When systems operate in isolation from each other, they can add to family stress instead of reducing it. And because of a focus on deficits rather than strengths, systems meant to help can end up undermining families.

WCPCAN will continue to advocate for public and private systems to take a more family-strengthening approach. Recognizing the complexity of the factors that put children at risk, we will work to find ways to better integrate fragmented services and systems.

what taxpayers think

A 2002 study found that citizens rated preventing the abuse and neglect of children as their second highest priority. It was more important than keeping taxes down, fighting crime and ensuring people’s safety and security and other important issues and was only preceded in importance by strengthening the public school system.

A more recent poll in Washington State found that more than 60% of voters support increasing funding for child abuse prevention. 45% of Washington voters felt the health, education and protection of children was either the most or second most important issue facing the state that the federal government could help with – a rating just below the economy and jobs and above homeland security, taxes, the environment and crime and violence.

In 2003, the Washington State Department of Health published the results of a study on community norms on child abuse and neglect. Its findings demonstrate wide agreement on prevention strategies believed to be the most critical. Second only to access to substance abuse and mental health services are those directly related to WPCPCAN's responsibilities: access to needed supports (including crisis nurseries), parenting education, parenting information for the general public, and home visits to new parents. Quality child care also ranked high as an effective child abuse prevention strategy in the public's understanding.

Taken together, these findings clearly indicate the existence of widespread public understanding of and political will for preventing child abuse and neglect instead of just intervening after it has already occurred.



photo courtesy of flashlightimages.com

" Studies have found abused and neglected children to be at least 25 percent more likely to experience problems such as delinquency, teen pregnancy, low academic achievement, drug use, and mental health problems. "

(In the Wake of Childhood Maltreatment, Kelley et al, National Institute of Justice., 1997)

¹ Perceptions of Child Abuse and Neglect Prevention: A Strategic Report on Research Findings. Peter D. Hart Research Associates/American Viewpoint. (Washington. DC: 2002).

² Every Child Matters Education Fund, Washington Survey Results, http://www.everychildmatters.org/site/DocServer/ecm_wa_polljune2004.html?docID=1985

³ Community Norms about Child Abuse and Neglect, Washington State Dept. of Health (January 2003).

poverty and child abuse and neglect

the impact of poverty

Research demonstrates that family poverty is the strongest factor known to be associated with child abuse and neglect.

The current 'ecological approach' to understanding the causes of child maltreatment emphasizes the many complex factors that interact to place children at greater risk of abuse and neglect. However, the most recent National Incidence Study of Child Abuse and Neglect found that "family income was significantly related to maltreatment rates in nearly every category of maltreatment."

The incidence study shows that, by comparison with children living in families with annual income of \$30,000 or more, children living in families with annual incomes below \$15,000 per year were:

- 15 times more likely to be abused
- 44 times more likely to be neglected, and
- 22 times more likely to die or be seriously injured as a result of maltreatment.

It can't be overemphasized that only a very small minority of low-income parents abuse or neglect their children. But the relationship between poverty and child maltreatment also can't be ignored. It provides important clues for helping focus on the right prevention programs, practice and policies.

family stress & risks to children

The leading theory regarding the relationship between poverty and abuse and neglect indicates that parents living at or below the poverty level often experience high degrees of stress and have relatively few material resources to help them deal with it.

Poverty increases the likelihood of depression, anxiety and high stress levels among parents. Lack of health insurance, inadequate child care, and limited access to medical care and social services are all common in families who are low-income. All of these increase the risk for abuse and neglect.

There are also direct risks to children from the effects of poverty. Children in poor families are at higher risk for receiving inadequate pre-natal care, increasing the chances of premature birth, birth anomalies, low birth weight and pre-birth exposure to toxins. These in turn are related to the development of physical, cognitive and emotional disabilities and chronic or serious illness. These are also risk factors for abuse and neglect.

poverty in washington state

- Almost a full third (32%) of Washington's families are considered low-income, meaning that they live at or below 200% of the Federal Poverty Level (FPL). 200% of FPL translates to an annual income of \$31,340 for a family of three.
- More than one in ten families (12%) live below 100% of the FPL- an annual income of \$15,670 or less for a family of three.
- Significant racial disparities characterize poverty in Washington. A full 75% of Hispanic children are living in poverty in Washington, versus 25% of white children.
- Almost 75% of the parents who are at or near poverty actually are working full or part time.
- Nearly 40% of the children under the age of five in Washington live in families with incomes below 200% of the FPL. Almost 20% are living in families below 100% FPL.

young children: at greatest risk

Poverty is of particular significance for young children. Research shows what happens during the first three years has a major impact on brain development. In particular, the way that brain cells connect and organize themselves is a major predictor of abilities in adulthood. These "pathways" are mostly created during the earliest years of life.

Children under the age of five are very open to new learning, but they are also extremely vulnerable to harmful experiences such as abuse and neglect.

- In Washington State and nationally, the age group that experiences the most abuse is children under one.
- In 2002, Washington had 657 victims of abuse under one, almost double the number of victims in each of the other age categories.
- Children five and under have more cases of abuse than those over five.

Young children are not only the most frequently abused; they are also the group most likely to experience fatalities from abuse. Nationally, children under the age of one accounted for 31% of all fatalities. In 2003, the WCPCAN Council identified children from birth to age 3 as the primary focus for the agency's prevention efforts.

⁴ Washington state demographics, National Center for Children in Poverty. 2003. www.nccp.org.

⁵ Washington state demographics, National Center for Children in Poverty. 2003. www.nccp.org.

⁶ Washington state demographics, National Center for Children in Poverty. 2003. www.nccp.org.

⁷ The State of Washington's Children - Summer 2002 Report; Washington Kids Count; 2002.

⁸ U.S. Census Bureau, Summary File 3, Poverty Profile 7 of the Census 2000 58 page profiles, 2002.

⁹ National Research Council, Institute of Medicine, The Science of Early Childhood Development: A Summary Report of From Neurons to Neighborhoods, 2000.

¹⁰ Child Maltreatment 2002, www.acf.hhs.gov/programs/cb/publications/cm02/cm02.pdf

¹¹ Fatalities Due to Child Abuse and Neglect, American Humane Society, 2004.

wcpcan's policy priorities

As Washington State's lead agency for child abuse and neglect prevention, WCPCAN has a responsibility to inform the policy process. We must ensure that legislators have the knowledge and understanding they need to develop policies that best protect children and strengthen families. In 2005, our policy priorities include:

strengthening the healthy development of children 0-3

Because children between birth and age three are both at greater risk for maltreatment AND experiencing a time of great learning and brain development, WCPCAN will focus on policies and programs that most impact young children. We support efforts that promote each child reaching their optimal development and that help parents better meet their young children's needs. We have a special interest in ensuring that services and supports are available to children most at risk.

supporting child welfare system reform

WCPCAN supports the goal of creating substantive changes in child welfare in order to improve the lives of the children served by that system and their families. We will work to support those areas of the reform plan that best align with our focus on young children.

protecting prevention investments

While we support the goal of reforming the child welfare system, WCPCAN knows that one of the ways to make the child welfare system function better is for it to be less burdened. This would mean fewer children in the system costing the state less money. We also recognize that the only way to ensure fewer children need to enter the system is to invest in proven prevention strategies. One of our policy priorities is ensuring that prevention dollars are not depleted in order to fund the reform plan.

using innovative methods to leverage private dollars

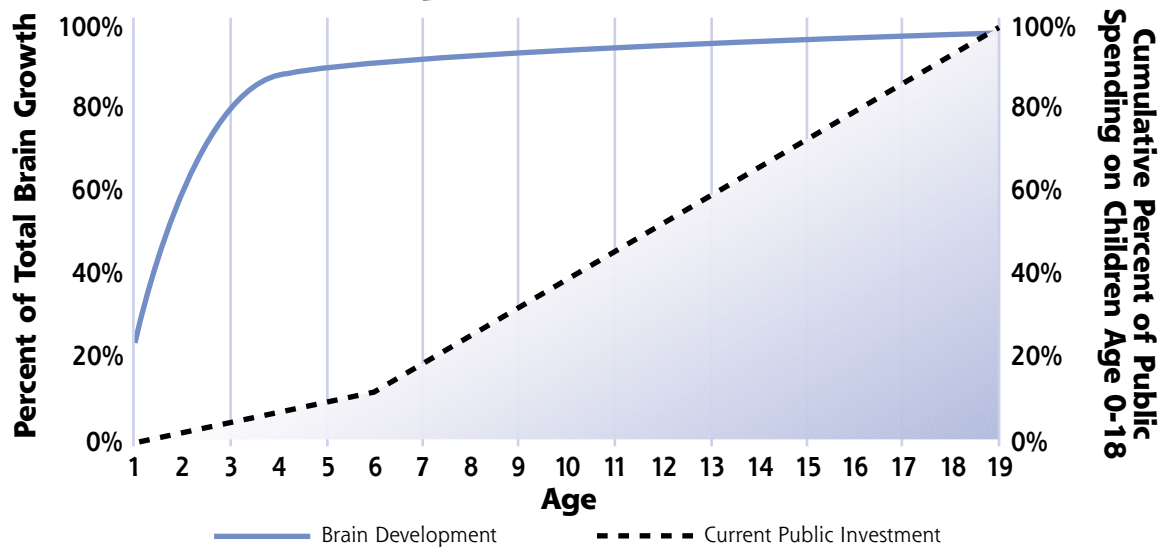
WCPCAN will seek to pass legislation that allows us to use an entrepreneurial approach to enhance public funds with private dollars. This is particularly important in this era of dwindling public resources.

In addition, WCPCAN will support policies that promote more integrated, comprehensive systems that strengthen families and reduce barriers to service.

mismatch between opportunity & investment

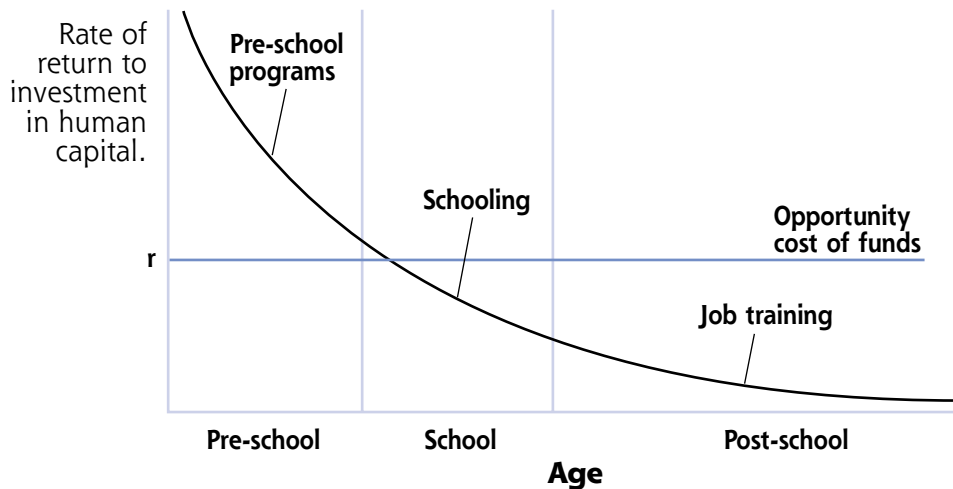
Although the vast majority of brain development takes place in children's first few years of life, less than 10 percent of public spending on children takes place during that period. The current priorities of public spending do not match research evidence.

Brain Development vs. Public Investment



Rates of Return

Rates of return to human capital investment initially setting investment to be equal across all ages.



Rates of return to human capital investment initially setting investment to be equal across all ages.

Carneiro, P and Heckman, J.J. Human Capital Policy, Paper presented at the Alvin Hansen Seminar, Harvard University, April 25, 2002. Center of Excellence for Early Childhood Development.

section 3



" Studies show that the public gets a better return on its investment if government focuses its resources on human capital (education, especially education in the very early years) than on physical capital (businesses). "

– Art Rolnick, Director of Research & Public Affairs, Federal Reserve Bank of Minneapolis. Harvard Family Research Project, The Evaluation Exchange Vol. X, No. 2, Summer 2004

innovative, sustainable approaches to community prevention

highlights from our public awareness & cause-related marketing campaigns

In 1982, WCPCAN became the first state agency in the nation created specifically to focus on prevention of child abuse and neglect. For more than 22 years, WCPCAN has been at the forefront of state and national efforts to promote greater community understanding of and involvement in the prevention of child abuse and neglect.

Research supports public education as an effective prevention strategy. Our public awareness activities have been integral to addressing child abuse and neglect in Washington. By increasing community awareness, we better fulfill our responsibility to offer communities resources and solutions.

Today, however, increased understanding of the complexities of effective prevention messaging and a tough economic climate have combined to challenge our ability to mount successful public education efforts.

To address these challenges, WCPCAN has embarked on a variety of innovative cause-related marketing endeavors.

Keep Kids Safe – Specialty License Plate

WCPCAN's proposed Keep Kids Safe specialty license plate originated with citizens seeking an innovative and sustainable revenue source to help with efforts to safeguard children from abuse, neglect and unintentional injury in Washington State. With WCPCAN's support, the group led a petition campaign to obtain the 2,000 signatures required by the Washington State Department of Licensing (DOL) as part of the special license plate application process.

WCPCAN's application for the Keep Kids Safe plate was approved by the DOL Special License Plate Review Board in September 2004. Legislation to create the plate will be considered in the 2005 session. If passed, the plate will be available for purchase in January 2006. For more information about the Keep Kids Safe specialized license plate, please visit our website at: http://www.wcpcan.wa.gov/temp_plate.asp.



Heirloom Birth Certificate – *Celebrate life with the gift of a lifetime*

An Heirloom Birth Certificate (HBC) is a specially designed birth certificate issued by the Washington State Department of Health to fund the prevention of child abuse and neglect in our state. A legal document signed by both the Governor and State Registrar, the HBC is available to anyone born in the state of Washington. While not as widely recognized as the standard-issue birth certificate, the HBC is nonetheless an important part of WCPCAN's public awareness and marketing efforts to combat child abuse and neglect. Proceeds from the sales of the certificates go to child abuse and neglect prevention programs in Washington.

The current Washington State Heirloom Birth Certificate hasn't been updated since its creation in the 1980's. In 2004, WCPCAN launched an effort to revitalize HBC sales, starting with a statewide search for a Washington artist to create a new HBC design. Anacortes native Jennifer Bowman was selected as the artist who will create Washington's new Heirloom Birth Certificate.

The new HBC will be available for purchase in January 2005.



Artist's concept for the new Heirloom Birth Certificate available in early 2005.

Have a Plan Video – *What will you do when your baby cries?*

All new parents experience fatigue, stress, anger and frustration. These are normal emotions. However, for some these emotions get out of control and put babies at severe risk.

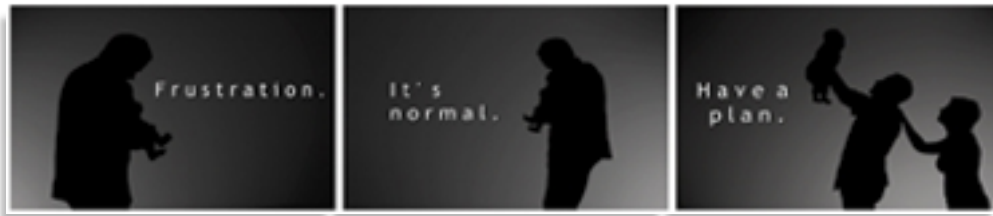
Shaken Baby Syndrome (SBS) is a collection of signs and symptoms resulting from the violent shaking of an infant or small child. Most often, the violence that leads to SBS is triggered by infant crying.

To address the needs of new parents, WCPCAN partnered with statewide organizations to develop and support the Have a Plan SBS prevention campaign. The key message of the campaign urges parents to plan ahead for how they will manage frustration, fatigue and anger when they occur. The campaign is a public-private partnership led by Children's Hospital and Regional Medical Center, the Conscious Fathering Program and WCPCAN. Numerous other governmental and private agencies also partner in this effort.

“ About 95% of Shaken Baby cases are caused by the persistent and inconsolable crying of a child in the first three to five months of life. ”

– Dr. Ronald Barr, B.C. Research Institute for Children's and Women's Health

A highlight of the “Have a Plan” SBS prevention campaign is a compelling five minute video. Available for purchase through the Washington State Department of Printing, the video can be viewed on the WCPCAN and Children's Hospital websites (www.wcpcan.wa.gov and www.seattlechildrens.org). An aggressive marketing campaign is underway to ensure that copies of the video are available in every hospital, birthing facility and public health clinic in Washington.



Child Abuse Prevention Month – Keeping Kids Safe in Washington

Since 1983, National Child Abuse Prevention Month has been observed annually each April to help raise awareness of the devastating effects of abuse and neglect. The campaign serves as a reminder that we all share responsibility for protecting our children.

The Washington State Blue Ribbon Collaborative is led by twelve organizations dedicated to eliminating child abuse and neglect in our state. The group's mission is to raise awareness and increase public involvement in prevention by collaborating and sharing resources statewide.

With WCPCAN in a coordinating role, the 2005 Blue Ribbon Collaborative includes:

- Child Care Resources
- Children's Hospital and Regional Medical Center
- Children's Response Center
- Conscious Fathering Program
- Deaconess Children's Services
- King County Dependency CASA
- DSHS – Division of Children and Family Services
- Parent Trust for Washington Children
- Partners Against Violence
- Salvation Army NW Regional Headquarters
- Washington State CASA

In 1989, the Blue Ribbon Campaign began with a single blue ribbon tied to the antenna of a grieving grandmother's car. Asked why she chose the color blue, Grandmother Bonnie Finney of Virginia responded that it represented the bruises on her grandson's body. The spirit of her blue ribbon grew, spread across the nation and became the widely-recognized symbol of Child Abuse Prevention Month that we see today.



Throughout April, the Blue Ribbon Collaborative sponsors special activities and distributes materials that encourage everyone to play a role in prevention as well as educate about how to make a positive difference in the lives of children and families.

The theme for Child Abuse Prevention Month is Keep Kids Safe. The Keep Kids Safe theme provides an umbrella for the issues of both child abuse and neglect and unintentional injury, which together account for the majority of child deaths in the United States. "Keep Kids Safe" reminds parents and other caregivers about the importance of protecting children, a message that resonates not only during April but throughout the year.

A variety of campaign resources are made available at no cost. Ordering information is provided on the WCPCAN website at: http://www.wcpcan.wa.gov/temp_campaign_toolkit.asp.

Washington State Children's Day – The Second Sunday in October

WCPCAN raises awareness of child abuse and neglect prevention through promotion of Washington State Children's Day, observed the second Sunday of each October.

Recognizing the risks children experience – for abuse, substance abuse, suicide, peer pressure, poverty, and academic failure – Children's Day seeks to communicate to our state's children that they are valued and represent the best hope for our future.


WCPCAN supports communities' efforts to recognize and acknowledge children's capabilities, nurture their potential and provide for their future by making annual mini-grants available for Children's Day events statewide.

More information about Washington State Children's Day is available on the WCPCAN website at http://www.wcpcan.wa.gov/temp_children's_day.asp.



Children's Day presents a special opportunity for communities throughout Washington to:

- Give time to children.
- Create positive memories and family connections.
- Take part in fun activities that create new traditions as well as value community customs.



" Recent studies of early childhood investments have shown remarkable success and indicate that the early years are important for early learning. "

– James J. Heckman, PhD - Nobel Laureate in Economic Sciences 2000

section 4

wcpcan council bios

Washington maintains the distinction of having created not an ordinary government agency, but a private/public partnership that brings together legislators, citizen advocates for children and child-serving agencies all under the aegis of the Office of the Governor.

Kyle E. Yasuda, MD, Chair

Dr. Yasuda is a pediatrician for Harborview Medical Center and a clinical professor for the Department of Pediatrics at the University of Washington School Of Medicine. He is the immediate past president of the WA Chapter of the American Academy of Pediatrics and has practiced at Virginia Mason Medical Center, Group Health Cooperative of Puget Sound and Children's Hospital and Regional Medical Center. He won the Organizational Leadership Award from Healthy Mothers, Healthy Babies in 1998 and has frequently been named a "Top Doc" by Seattle Magazine.

Susan A. Manfred, Vice-Chair

Susan Manfred recently retired from her position as executive director of the Vanessa Behan Crisis Nursery in Spokane. She has a background in secondary education and has held various leadership positions in the Spokane area, including the Spokane Child Abuse Prevention Council, Exchange Club and Spokane County Developmental Disabilities Advisory Board. Her BA is from Gonzaga University.

Uma Ahluwalia

Uma Ahluwalia is assistant secretary of the Children's Administration, DSHS. A native of India, Ahluwalia previously served as director of external affairs with the Washington D.C. Child and Family Services agency, acting assistant chief of staff and policy liaison in the Maryland Governor's Office, and deputy director for Child, Adult and Family Services with the Prince George County Department of Human Resources in Maryland. She has an MSW from the University of Delhi and a master's degree in health administration from George Washington University.

Senator Dale Brandland, 42nd Legislative District

Senator Dale Brandland formerly worked in law enforcement as Whatcom County Sheriff and with the Bellingham Police Department. He serves as vice-chair of the Senate Agriculture Committee and as a member of the Health and Long Term Care and Judiciary committees. Past president of the WA State Sheriff and Police Chiefs Association and of the United Way of Whatcom County Board of Directors, he currently serves on the boards of the Whatcom Hospice Foundation and Boys and Girls Club and on the Whatcom County Mental Health Advisory Board. He is a graduate of Washington State University and the FBI National Academy. He represents the Senate Republican Caucus on the WCPCAN Council.

Melinda Dyer

Melinda Dyer is a supervisor for the Education of Homeless Children and Youth program in the Office of the Superintendent of Public Instruction. She serves on the boards of the National Association for the Education of Homeless Children and Youth, the WA Advisory Council on Homelessness and the WA Coalition for the Homeless. She is a certificated teacher and has taught at the secondary level in Oregon and Washington. She has a master's degree from Oregon State University.

Ruth Garner

Ruth Garner is a licensed Guardian Ad Litem for Juvenile and Domestic Court and a community activist. She has served as a member of the Jefferson County Shared Child and Family Team for wraparound services since its inception. A former small business owner, she is also a registered nurse whose practice includes work with astronauts in the Gemini space program. Her degree is from Washington University in St. Louis, Missouri.

Patty Hayes

Patty Hayes is the assistant secretary for the Washington State Department of Health's Division of Community and Family Health. She previously served as Department of Health's director of policy, legislative and constituent relations, assistant professor at St. Martin's College, and as executive director of the Nursing Care Quality Assurance Commission. She was inducted into the Washington State Nurses Association's Nursing Hall of Fame in 2002. She graduated from the University of Washington with a Masters of Nursing and a BS in Nursing.

Darlene Peters

Darlene Peters is a psychologist with the North Kitsap School District, where she also serves as a counselor for a day treatment program for emotionally and behaviorally disturbed children. A member of the Port Gamble S'Klallam Tribe Elders Council, she is past president of the WA State School Counselors Association, a member of the American Psychological Association and the National Association of School Psychologists. She is currently in the process of completing her Ph.D, at Indiana University.

Senator Debbie Regala, 27th Legislative District

Senator Debbie Regala represents the Senate Democratic Caucus on the WCPCAN Council. She serves on the Senate Children & Family Services & Corrections, Natural Resources, Energy & Water, and Ways & Means committees. She also serves on the Joint Legislative Audit and Review Committee, Legislative Ethics Board and the Select Committee on Pension Policy. She volunteers and has served as a board member for local school, church and community organizations including Habitat for Humanity, Sexual Assault Center of Pierce County, Nature Conservancy, and Point Defiance Zoological Society. Prior to serving in the legislature, she was a Metropolitan Park District of Tacoma commissioner. She holds a BA from the University of Puget Sound.

Representative Dan Roach, 31st Legislative District

Representative Dan Roach serves on the WCPCAN Council as the appointee of the House Republican Caucus. He is a member of the House Children and Family Services, Finance, and Financial Institutions and Insurance committees. A mortgage broker, he and his wife also own and operate a small business. He created the Student Meth Advisory Council to involve youth in the fight against methamphetamines and is a member of the Sumner Rotary, the Lake Tapps Task Force, the American Council of Young Political Leaders and various other local organizations and chambers of commerce. A church youth group leader and Boy Scout advisor, Roach has two young children. He holds a BA from Brigham Young University.

Representative Shay Schual-Berke, MD, 33rd Legislative District

Representative Shay Schual-Berke, MD, was appointed to the WCPCAN Council by the House Democratic Caucus. Board-certified in internal medicine and cardiology, she retired from her medical practice in 1992. She serves as chair of the House Financial Institutions and Insurance committee and is on the Appropriations and Health Care committees. A former member of the Highline School Board, she has served on the board of the WA School Directors Association and currently is a board member of the Mount Rainier High School Foundation and the Wesley Homes and Gardens Retirement Center. Volunteer affiliations include Northwest Harvest and the PTA. Her MD is from New York Medical College.

Charles Shelan, MSW

Charles Shelan has served as the executive director of Community Youth Services in Olympia since 1979. Charles is the immediate past chair of the WCPCAN Council and also chaired the program committee. Very active in his community, he currently serves as a contributing editor of the Olympian newspaper. Earlier in his career, he and his wife served in the Peace Corps in South Korea. His BA is from the University of Texas, Austin, and his MSW from the University of Washington.

Rebecca Torres Valdovinos

Rebecca Torres Valdovinos has a master's degree in education and extensive experience instructing and supervising English as a Second Language programs in Washington and California. She has published numerous learning aids for adult English language learners and secondary teachers of English language learners, as well as social studies curricula for this student population. She was the president of the state's professional organization of the Washington Association of Teachers of English to Speakers of Other Languages (WAESOL). She has been an adjunct professor at the University of Washington and Washington State University. An administrator and professor for the Floral Arts Program at Clover Park Technical College, she also is currently on the board of the Southwestern Washington Dance Center and is actively involved in the Nutcracker Ballet production in Lewis County.

Marla Wood

Marla Wood is a K-12 extended learning and parent training program specialist for the Vancouver School District. Previous positions include Vancouver Symphony Orchestra marketing director, director of the Skyhawks Sports Academy and career center coordinator for Battleground High School. She has a BS from Portland State University.

thank you

Thank you for reading this report. We know preventing child abuse and neglect is no simple matter. But with everyone's support, we can face these challenges and turn them into opportunities that reach across systems to significantly reduce abuse and neglect in our state.

We would especially like to thank all of our partners in prevention, the many agencies and organizations that work hard every day to strengthen families and create opportunities for the next generation of Washington citizens. That's the greatest return on investment that any of us can make.

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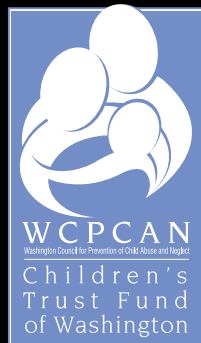
To see a copy of last year's report, visit our website at http://www.wcpcan.wa.gov/temp_2004_report.asp

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our mission

To provide leadership to and a statewide focus on the prevention of child abuse and neglect, and to encourage and support effective community prevention efforts.



www.wcpca.n.wa.gov



Because protecting the environment also helps make the world a better place for children, this report was printed on 30% post consumer recycled paper.